

**APPLICATION FOR UNITED STATES PATENT
DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ELECTRONIC CAMERA

described and claimed in the specification:

Check one

- *a. attached hereto.
- b. filed on _____ as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No.11-275118 filed September 28, 1999
Japanese Patent Application No.11-318164 filed November 9, 1999

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024;
Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411;
Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Registration No. 32,771 and
Mario A. Costantino, Registration No. 33,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.L.C., P.L.C., P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Full Name of First or Sole Inventor	Hideo	Given Name	Middle Initial	HOSHUYAMA	Family Name
2	**Inventor's Signature:	Hideo			Hoshuyama	
3	**Date of Signature:	Feb.	Month	10	2000	Year
	Residence:	Kawasaki - shi	City	Kanagawa - ken		Japan
	Citizenship:	Japan		State or Province	Country	
	Post Office Address:	(Insert complete mailing address, including country) C/O Nikon Corporation, Fuji Bldg., 2-3, Marunouchi 3-chome, Chiyoda-ku, TOKYO 100-8331 JAPAN				

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

1	Typewritten Full Name of Second Joint Inventor (if any)	Tetsuya	TAKESHITA
2	**Inventor's Signature:	Given Name Middle Initial Family Name	
3	**Date of Signature:	Feb	10 2000
	Residence:	Kawasaki - shi	Month Day Year
			Kanagawa - ken Japan
	Citizenship:	City State or Province Country	
	Japan		
	Post Office Address: (Insert complete mailing address, including country)	C/O Nikon Corporation, Fuji Bldg., 2-3, Marunouchi 3-chome, Chiyoda-ku, TOKYO 100-8331 JAPAN	
1	Typewritten Full Name of Third Joint Inventor (if any)	Given Name	Middle Initial Family Name
2	**Inventor's Signature:		
3	**Date of Signature:	Month	Day Year
	Residence:		
		City	State or Province Country
	Citizenship:		
	Post Office Address: (Insert complete mailing address, including country)		
1	Typewritten Full Name of Fourth Joint Inventor (if any)	Given Name	Middle Initial Family Name
2	**Inventor's Signature:		
3	**Date of Signature:	Month	Day Year
	Residence:		
		City	State or Province Country
	Citizenship:		
	Post Office Address: (Insert complete mailing address, including country)		
1	Typewritten Full Name of Fifth Joint Inventor (if any)	Given Name	Middle Initial Family Name
2	**Inventor's Signature:		
3	**Date of Signature:	Month	Day Year
	Residence:		
		City	State or Province Country
	Citizenship:		
	Post Office Address: (Insert complete mailing address, including country)		

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

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